

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
or **Fax** (571)-273-2885

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

26119 7590 03/02/2006

**KLARQUIST SPARKMAN LLP**  
121 S.W. SALMON STREET  
SUITE 1600  
PORTLAND, OR 97204

**Certificate of Mailing or Transmission**  
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<b>Kyle B. Rinehart</b>	(Depositor's name)
<i>[Signature]</i>	(Signature)
<b>April 30, 2006</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
-----------------	-------------	----------------------	---------------------	------------------

10/767,135	01/28/2004	Chuang Gu	3382-67742-01	4302
------------	------------	-----------	---------------	------

TITLE OF INVENTION: TRACKING SEMANTIC OBJECTS IN VECTOR IMAGE SEQUENCES

**REGION EXTRACTION IN VECTOR IMAGES (as amended)**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/02/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHOUBIN, BARRY	2623	382-103000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Klarquist Sparkman, LLP**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Microsoft Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Redmond, Washington**

01 FC:1501	1400.00 DA
02 FC:1504	300.00 DA
03 FC:8001	9.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee

☒ Publication Fee (No small entity discount permitted)

☒ Advance Order - # of Copies **3**

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **02-4950** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name

**Kyle B. Rinehart**

Date

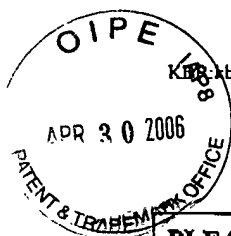
**April 30, 2006**

Registration No.

**47,027**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



KBR:abr 3382-67742-01 521507.doc 04/30/06 114732.05

**KLARQUIST SPARKMAN, LLP**

16th Floor World Trade Center, 121 S.W. Salmon Street, Portland, Oregon 97204 U.S.A.

PHONE: 503-595-5300 FAX: 503-595-5301

**PLEASE DELIVER DIRECTLY TO EXAMINER BARRY CHOOBIN****Fax No.:** (571) 273-2885**Total No. Pages:** 2, including this cover sheet**Message:** Transmitted herewith for filing in the below-identified application is a Fee Transmittal. If you do not receive all pages or if you have problems receiving transmittal, please call Kyle B. Rinehart at (503) 595-5300. The fee (large entity) has been calculated as shown below.**In re application of:** Gu et al.**Application No.** 10/767,135**Filed:** January 28, 2004**Confirmation No.** 4302**For:** REGION EXTRACTION IN VECTOR  
IMAGES (AS AMENDED)**Examiner:** Barry Choobin**Art Unit:** 2623**Attorney Reference No.** 3382-67742-01

- ☒ In connection with issuance of a patent:
- ☒ Form PTOL-85b
- ☒ Advance order of 3 copies (Fee \$3.00 each = \$ 9.00)
- ☒ Issue Fee (\$1,400.00)
- ☒ Publication Fee (\$300.00)
- ☒ Please charge our Deposit Account No. 02-4550 in the amount of \$1,709.00.
- ☒ The Director is hereby authorized to charge any additional fees that may be required in connection with issuance of a patent, or credit over-payment, to Account No. 02-4550.

**CERTIFICATE OF FACSIMILE**

I hereby certify that this paper and the documents referred to as being attached or enclosed herewith are being facsimile transmitted to fax number (571) 273-2885 on the date shown below.

Attorney or Agent  
for Applicant(s)Date Transmitted April 30, 2006  
Kyle B. Rinehart  
Registration No. 47,027April 30, 2006  
Date

cc: Docketing

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS CONFIDENTIAL AND ONLY FOR THE INTENDED RECIPIENT IDENTIFIED ABOVE. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION OR USE OF THIS COMMUNICATION IS UNLAWFUL. IF YOU HAVE RECEIVED THIS TRANSMISSION IN ERROR, PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE (COLLECT), RETURN THE ORIGINAL MESSAGE TO US, AND RETAIN NO COPY.

BEST AVAILABLE COPY